

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective 4-1-07

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u> Line of Insurance	\$17,256,654	4.96%

 Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

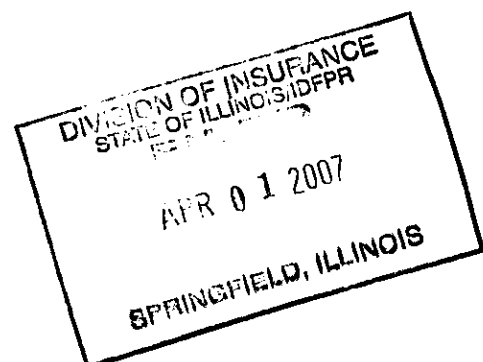
 Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are filing to adopt the NCCI changes approved by circular IL-2006-11. In addition, we are adopting the class code changes outlined in circular IL-2006-10.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Allied P&C Insurance Company
Name of Company

Marie T. Safreed, State Filing Specialist
Official - Title



ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 4-1-07

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u> Line of Insurance	\$2,716,518	5.4%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are filing to adopt the NCCI changes approved by circular IL-2006-11. In addition, we are adopting the class code changes outlined in circular IL-2006-10.

*Adjusted to reflect all prior rate changes.

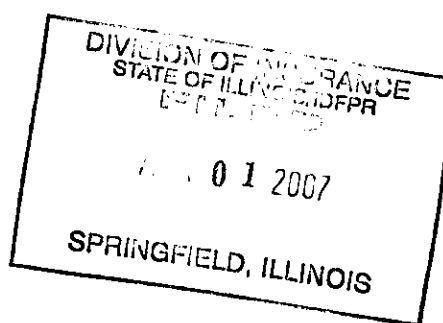
**Change in Company's premium level which will result from application of new rates.

AMCO Insurance Company

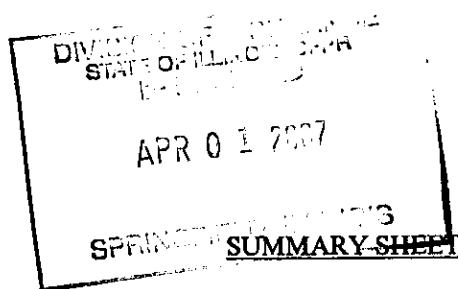
Name of Company

Marie T. Safreed, State Filing Specialist

Official - Title



Form (RF-3)



Change in Company's premium or rate level produced by rate revision effective 04/01/2007

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>\$4,365,768</u>	<u>-5.4%</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Effective 4/1/07, we wish to adopt NCCT's loss costs and minimum premium formula and decrease our LCM.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

American Economy Insurance Company

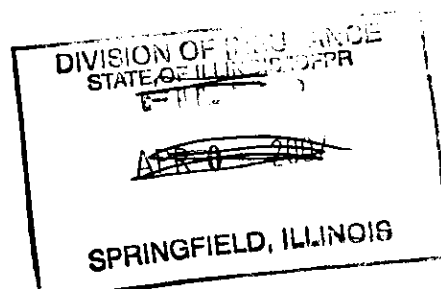
Name of Company

Patty McCollum

Patty McCollum, CPCU
Assistant Vice President

Official - Title

H29219D



SUMMARY SHEET

FORM (RF-3)

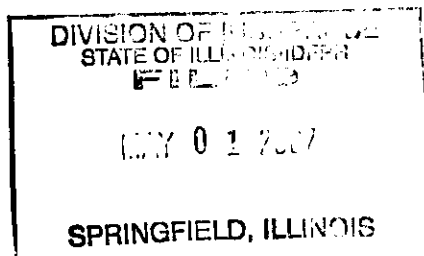
Change in Company's premium or rate level produced by rate revision
Effective May 1, 2007

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Comp.</u>	<u>\$14,551,000</u>	<u>+0.8%</u>

Does filing only apply to certain territory (territories) or certain classes? No
If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory
Organization, specify organization): Circular IL-2006-11 NCCI Adoption/Delay

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will
result from application of new rates.



AMERICAN FAMILY MUTUAL INS. CO.

Name of Company

James P. Meyer

Official - Title

James P. Meyer, ACP, AIM
Senior Pricing Analyst/Filings

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JAN 29 2007

IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 03/01/2007

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers' Compensation	\$1,639,190	-2.3%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of NCCI advisory loss costs and rating values effective January 1, 2007

Revising Effective Date

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.American Guarantee &
Liability Insurance Company
Name of CompanyDenise Goode, Secretary
Official - Title

Form (RF-3)

SUMMARY SHEET

APR 01 2007

Change in Company's premium or rate level produced by rate revision effective 04/01/2007

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>\$ 5,222,378</u>	<u>-6.9%</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Effective 4/1/07, we wish to adopt NCCI's loss costs and minimum premium formula and decrease our LCM.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

American States Insurance Company

Name of Company

Patty McCollum

Patty McCollum, CPCU
Assistant Vice President

Official - Title

H29219D

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IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 03/01/2007

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers' Compensation Line of Insurance	\$9,102,921	+3.2%

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of NCCI advisory loss costs and rating values effective January 1, 2007Revising Effective Date

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.American Zurich Insurance
Company

Name of Company

Denise Goode, Secretary
Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective May 1, 2007

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	2,539,689	-2.8
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: no

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Delay adoption of NCCI rates, change our deviation from 1.02 to 1.00 and adopt the seven hazard groups reference in NCCI Item Filing B-1403, to be effective May 1, 2007.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Amerisure Insurance Company

Name of Company

Tracy Upcott - Compliance Analyst I

Official - Title

MAY 01 2007

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective May 1, 2007

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	13,083,117	+6.4
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: no

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Delay adoption of NCCI rates, change our deviation from 1.13 to 1.20 and adopt the seven hazard groups referenced in NCCI Item Filing B-1403, to be effective May 1, 2007.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Amerisure Mutual Insurance Company

Name of Company

Tracy Upcott - Compliance Analyst I

Official - Title

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JAN 29 2007

IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

MAY 01 2007

SPRINGFIELD, ILLINOIS

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JAN 29 2007

IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 03/01/2007

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers' Compensation	\$1,289,947	+4.3%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

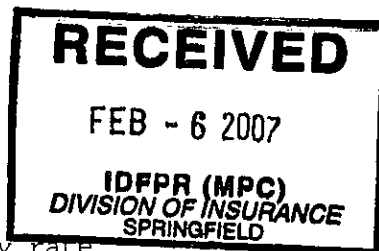
Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of NCCI advisory loss costs and rating values effective January 1, 2007

Revising Effective Rate

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.Assurance Company of America
Name of CompanyDenise Goode, Secretary
Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 05/01/07

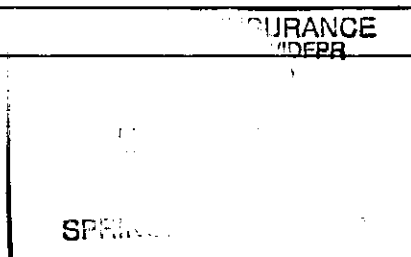
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>\$639,056</u>	<u>-0.3%</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: No.

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): _____

Adopting NCCI rates as found in NCCI Circular IL-2006-11.

- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will
result from application of new rates.



Citizens Insurance Company of America
Name of Company

Michele L. Holm - Sr. Pricing Analyst
Official - Title

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FEB - 6 2007

IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

Form (RF-3)

SUMMARY SHEETChange in Company's premium or rate level produced by rate
revision effective 05/01/07

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial	SPL	
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation Line of Insurance	\$3,478,034	0.8%

Does filing only apply to certain territory (territories) or certain classes?

If so, specify: No.Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): _____

Adopting NCCI rates as found in NCCI Circular IL-2006-11.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.Citizens Insurance Company of Illinois

Name of Company

Michele L. Holm - Sr. Pricing Analyst

Official - Title

ILLINOIS SUMMARY SHEET

FORM RF-3

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FEB - 1 2007

IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELDChange in Company's premium or rate level produced by rate revision effective January 1, 2007

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	820,652	0
16. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify _____

Brief description of filing (if filing follows rates of an advisory organization, specify organization) _____

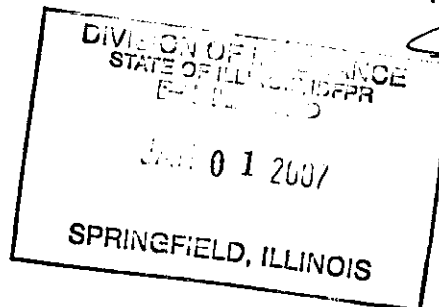
* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Clarendon National Insurance Company

Name of Company

Official - Title



RECEIVED

JAN 29 2007

IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 03/01/2007

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers' Compensation	\$74,875	+0.3%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of NCCI advisory loss costs and rating values effective January 1, 2007Revising Effective Date

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.Colonial American Casualty
& Surety Company

Name of Company

Denise Goode, Secretary

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

6/1/2007 NB & RB

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	\$21,440,177	-2.5%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

NCCI

*Adjusted to reflect all prior rate changes.

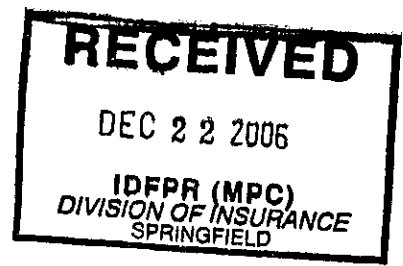
**Change in Company's premium level which will result from application of new rates.

Consolidated Insurance Company

Name of Company

Tammy Blake, Sr. Analyst, Regulatory Filing

Official - Title



Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

June 1, 2007

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u> <u>Line of Insurance</u>	312,400 (CY2005)	2.0%

Does filing only apply to certain territory (territories) or certain classes? If so, specify:
No.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
To adopt NCCI's 1/1/2007 loss costs

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Crum & Forster Indemnity Company

Name of Company

Ruth A. Overholser
Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective 4-1-07

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u> Line of Insurance	\$570,413	4.1%

 Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

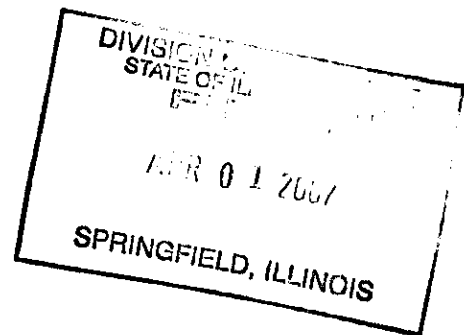
 Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are filing to adopt the NCCI changes approved by circular IL-2006-11. In addition, we are adopting the class code changes outlined in circular IL-2006-10.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Depositors Insurance Company
Name of Company

Marie T. Safreed, State Filing Specialist
Official - Title



ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 03/01/2007

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	14, 000,000	+0.5%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopting 1/1/07 NCCI
advisory loss costs with a loss cost multiplier of 1.600.

*Adjusted to reflect all prior rate changes.

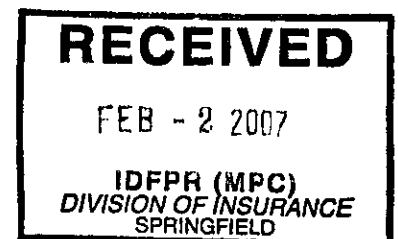
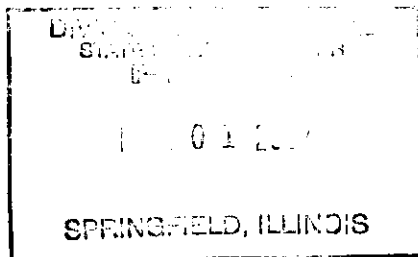
**Change in Company's premium level which will result from application of new rates.

Everest National Insurance Company

Name of Company

George Sgelken - Vice President

Official - Title



ILLINOIS SUMMARY SHEET

FORM RF-3

RECEIVED

JAN 16 2007

IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

Change in Company's premium or rate level produced by rate revision effective 1-26-07

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation		
16. Other <u>WC</u>	<u>3608,479</u>	<u>+12%</u>
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify _____

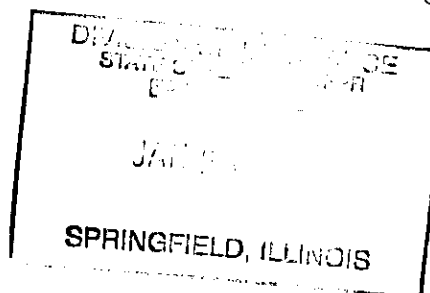
Brief description of filing (if filing follows rates of an advisory organization, specify organization) _____

7540 Deviation to Loss Cost

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

Federated Rural Electric Ins. Exchange
Name of Company

Annette Alexander, Actuarial Analyst
Official — Title



SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective May 1, 2007

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois) *</u>	(3) <u>Percent Change (+ or -) **</u>
1. Automobile Liability Private Passenger		
Commercial		
2. Automobile Physical Damage Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u>	<u>15,489,765</u>	<u>2.5%</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

We are revising our multiplier and deviations on some class codes. The impact is +2.5% change in
our premium level.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which
will result from application of new rates.

Federated Mutual Ins. Co.

Name of Company

Brad Hanson - Vice President

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective May 1, 2006

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+ or -) **
1. Automobile Liability Private Passenger		
Commercial		
2. Automobile Physical Damage Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u>	<u>75,274</u>	<u>2.5%</u>
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

We are revising our multiplier and deviations on some class codes. The impact is +2.5% change in
our premium level.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which
will result from application of new rates.

Federated Service Ins. Co.
Name of Company
Brad Hanson – Vice President
Official – Title

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JAN 29 2007

IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 03/01/2007

(1) Coverage		(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers' Compensation Line of Insurance	\$1,318,122	+0.2%

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of NCCI advisory loss costs and rating values effective January 1, 2007

Revising Effective Date

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.Fidelity & Deposit Company
of Maryland

Name of Company

Denise Goode, Secretary
Official - Title

Form (RF-3)

SPRINGFIELD, ILLINOIS

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 04/01/2007

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>\$4,175,263</u>	<u>0.6%</u>

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Effective 4/1/07, we wish to adopt NCCI's loss costs and minimum premium formula and decrease our LCM.

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

First National Insurance Company of America

Name of Company



Patty McCollum, CPCU
Assistant Vice President

Official - Title

H29219D

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 04/01/2007

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>\$ 1,939,619</u>	<u>-5.6%</u>
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Effective 4/1/07, we wish to adopt NCCI's loss costs and minimum premium formula and decrease our LCM.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

General Insurance Company of America

Name of Company



Patty McCollum, CPCU

Assistant Vice President

Official - Title

H29219D

SUMMARY SHEET

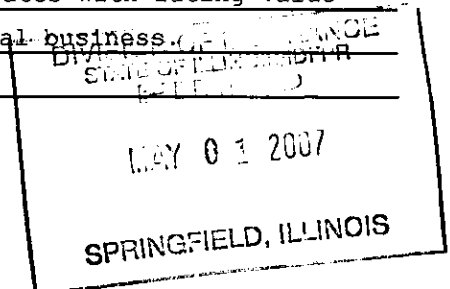
Change in Company's premium or rate level produced by rate
revision effective May 1, 2007.

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>10,208,343</u>	<u>+0.1%</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): Adoption of NCCI rates with rating value
exceptions to be effective May 1, 2007 for new and renewal business.

- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will
result from application of new rates.



Grinnell Mutual Reinsurance Company
Name of Company

Karen Bethea - Actuary
Official - Title

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**IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD**

Form (RF-3)

SUMMARY SHEET	
STATE FILE NO.	FILE NO.
SPRINGFIELD, ILLINOIS	
SPRINGFIELD, ILLINOIS	

Change in Company's premium or rate level produced by rate
revision effective 05/01/07

(1) Coverage	(2) Premium Volume (Illinois)	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation	\$1,827,286	0.2%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes?

If so, specify: No.

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization):

Adopting NCCI rates as found in NCCI Circular IL-2006-11.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.

Hanover Insurance Company

Name of Company

Michele L. Holm - Sr. Pricing Analyst

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

6/1/2007 NB & RB

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	\$3,663,169	-7.0%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): NCCI

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Indiana Insurance Company

Name of Company

Tammy Blake, Sr. Analyst, Regulatory Filing

Official - Title

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IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 03/01/2007

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers'	\$3,869,628	+3.0%
Compensation		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of NCCI advisory loss costs and rating values effective January 1, 2007

Revising Effective Date

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.Maryland Casualty Insurance
Company

Name of CompanyDenise Goode, Secretary
Official - Title

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IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

Form (RF-3)

SUMMARY SHEETChange in Company's premium or rate level produced by rate
revision effective 05/01/07

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>\$2,582,882</u>	<u>0.6%</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: No.Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): _____

Adopting NCCI rates as found in NCCI Circular IL-2006-11.

- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will
result from application of new rates.

Massachusetts Bay Insurance Company
Name of Company

Michele L. Holm - Sr. Pricing Analyst
Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

6/1/2007 NB & RB

(1) Coverage	(2) Annual Premium- Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	SPRIN	
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation	\$9,239,620	-4.3%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

NCCI

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

The Netherlands Insurance Company

Name of Company

Tammy Blake, Sr. Analyst, Regulatory Filing

Official - Title

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IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 03/01/2007

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers'	\$2,600,377	+3.4%
Compensation		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of NCCI advisory loss costs and rating values effective January 1, 2007Revising Effective Date

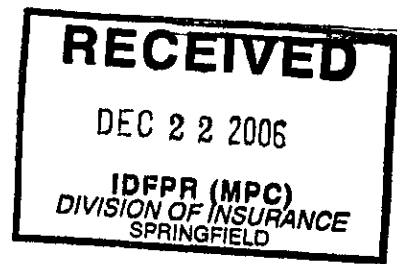
* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.Northern Insurance Company of
New York

Name of Company

Denise Goode, Secretary

Official - Title



Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

June 1, 2007

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u> <u>Line of Insurance</u>	2,447,283 (CY2005)	2.0%

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

To adopt NCCI's 1/1/2007 loss costs

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

The North River Insurance Company

Name of Company

Ruth A. Overholser

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

6/1/2007 NB & RB

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	\$7,993	-2.2%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): NCCI

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Peerless Indemnity Insurance Company

Name of Company

Tammy Blake, Sr. Analyst, Regulatory Filing

Official - Title

JUN 01 2007

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective _____

6/1/2007 NB & RB

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial	_____	_____
2. Automobile Physical Damage Private Passenger Commercial	_____	_____
3. Liability Other Than Auto	_____	_____
4. Burglary and Theft	_____	_____
5. Glass	_____	_____
6. Fidelity	_____	_____
7. Surety	_____	_____
8. Boiler and Machinery	_____	_____
9. Fire	_____	_____
10. Extended Coverage	_____	_____
11. Inland Marine	_____	_____
12. Homeowners	_____	_____
13. Commercial Multi-Peril	_____	_____
14. Crop Hail	_____	_____
15. Other <u>Workers Compensation</u>	\$2,439,028	-5.2%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): _____ NCCI

*Adjusted to reflect all prior rate changes.

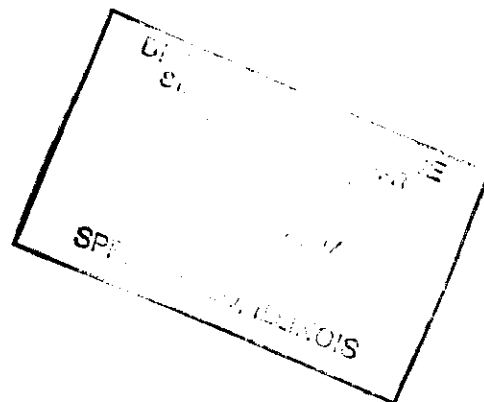
**Change in Company's premium level which will result from application of new rates.

Peerless Insurance Company

Name of Company

Tammy Blake, Sr. Analyst, Regulatory Filing

Official - Title



ILLINOIS SUMMARY SHEET

FORM RF-3

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IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELDChange in Company's premium or rate level produced by rate revision effective January 1, 2007

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	602,992	0
16. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify _____

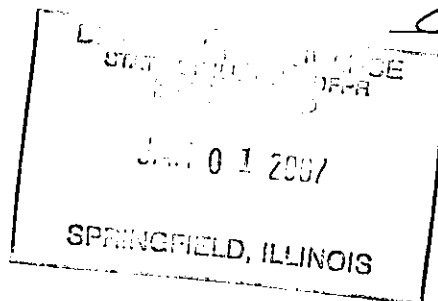
Brief description of filing (if filing follows rates of an advisory organization, specify organization) _____

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Praetorian Insurance Company

Name of Company


 Official - Title


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IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective January 1, 2007

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	0	0
16. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify _____

Brief description of filing (if filing follows rates of an advisory organization, specify organization) _____

* Adjusted to reflect all prior rate changes.

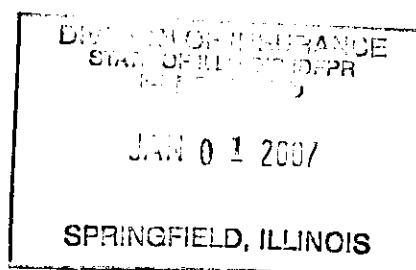
** Change in Company's premium level which will result from application of new rates.

Redland Insurance Company

Name of Company

Jim M. Analyst

Official - Title



Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 3/1/2007

(1) Coverage		(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other <u>Workers Compensation</u> <u>Line of Insurance</u>	<u>427,251</u>	<u>-6.3%</u>

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

We are adopting the NCCI loss costs that are effective 1/1/07 and the LCM tiering.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.Selective Insurance Company of
South Carolina

Name of Company

Judy Symons - State Filings
Specialist

Official - Title

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IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 3/1/2007

(1) Coverage		(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other <u>Workers Compensation</u> <u>Line of Insurance</u>	<u>13,445,398</u>	<u>+5.7%</u>

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

We are adopting the NCCI loss costs that are effective 1/1/07 and implementing our LCM tiering.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.Selective Insurance Company of
the Southeast

Name of Company

Judy Symons – State Filings
Specialist

Official - Title

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**IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD**

Form (RF-3)

**ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective

June 1, 2007

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u> <u>Line of Insurance</u>	7,622,568 (CY2005)	2.0%

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

To adopt NCCI's 1/1/2007 loss costs

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

United States Fire Insurance Company

Name of Company

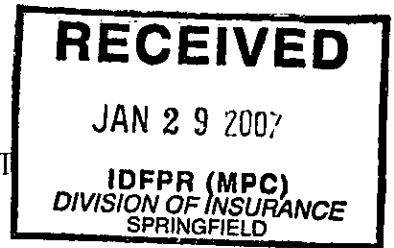


Official - Title

3/13/07
3/13/07
3/13/07

Form (RF-3)

SUMMARY SHEET



Change in Company's premium or rate level produced by rate revision effective 03/01/2007

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers' Compensation	\$50,419,277	+2.0%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of NCCI advisory loss costs and rating values effective January 1, 2007

Revising Effective Date

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Zurich American Insurance Company

Name of Company

Denise Goode, Secretary
Official - Title

RECEIVED

JAN 29 2007

**IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD**

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 03/01/2007

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger		
Commercial		
2. Automobile Physical Damage Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers' Compensation	\$3,626,749	+2.8%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of NCCI advisory loss costs and rating values effective January 1, 2007Revising Effective date

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.Zurich American Insurance
Company of Illinois

Name of Company

Denise Goode, Secretary

Official - Title